

DALLAS COUNTY, TEXAS

AUTHORIZED PERMIT FOR AUTOPSY

Dr. Earl F. Rose
 To: Pathology Department
 Parkland Memorial Hospital
 5201 Harry Hines Boulevard
 Dallas 35, Texas

I, Joe B. Brown, Jr., Justice of the Peace, Precinct No. 7, Dallas County, Texas do upon my own determination deem that this autopsy is necessary and hereby authorize you to perform an autopsy upon the following named deceased person:

J. D. Tippett
 Name of deceased

238 Glencairn, Dallas
 Address

Age 39 Sex male

Race white

D O A Methodist Hospital
 Place of death

1:15 P. M., November 22, 1963
 Date and time of death

Requested by or informant: Homicide Bureau, Dallas Police Department

PERTINENT FACTS REGARDING DEATH

Deceased, a Dallas Police Officer, was shot at 503 East Tenth Street; was rushed to Methodist Hospital where he was pronounced dead on arrival. Missiles should be retained and delivered to the Dallas Crime Lab.

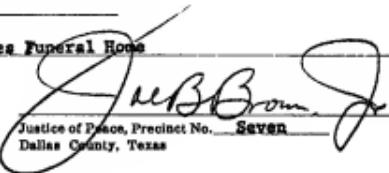
Please forward a copy of your autopsy findings to: (Name to be checked)

- Joe B. Brown, Jr. Justice of Peace, Precinct No. 7, Place 2
- Dr. J. M. Pickard, County Health Officer
- *Henry Wade, District Attorney
- J. E. (Bill) Decker, Sheriff
- Capt. J. W. (Will) Fritz, Dallas Police Department
- Chief, C. N. Penn, Dallas Fire Department
- Mrs. Maurine Lamm, Bureau of Vital Statistics
-

Please release the body to: Dudley Hughes Funeral Home

Date November 22, 1963

Time 3:00 P. M.


 Justice of Peace, Precinct No. Seven
 Dallas County, Texas

PARKLAND MEMORIAL HOSPITAL

PATHOLOGY LABORATORY

Autopsy Number: M53-352

B L B

Full

Unit No. [Redacted]

Name: Tippit, J. D.

Age: 39 Race: White Sex: Male

Admitted: 11-22-63 DOA

Expired:

Autopsy date: 11-22-63, 3:15 P.M.

Service:

Autopsy by: Earl F. Rose, M. D.

Coroner: Judge Joe E. Brown, Jr.

Restrictions: None

EXTERNAL EXAMINATION:

External examination reveals a well developed white male measuring 5 foot, 11 inches in length and weighing an estimated 175 to 180 pounds. The hair is black, slightly wavy, very slight frontal balding. The irides are blue, the pupils are equal at 5 mm. Rigor is not present. Very slight posterior mottled lividity and body heat is present. Oral hygiene is good. The neck is not remarkable. Hair distribution is normal, the penis is circumcised. Identification bands on the left wrist, right wrist and left ankle.

There are four entrance types of wounds. No. 1 is 4 3/4 inches from the top of the head and 3 3/4 inches to the right of the midline. This measures 3/8 x 1/4 inch and is surrounded by a contusion ring. No powder tattooing is noted at the margins.

Wound No. 2 is 17 inches from the top of the head on the right chest. It is 4 inches to the right of the midline, above and slightly medial to the right nipple. It measures 3/8 x 1/4 of an inch, surrounded by bruising. There is also a contusion ring.

Wound No. 3 is 21 inches from the top of the head, along the anterior lateral side of the right chest and is 6 inches to the right of the midline. This measures 5/16 x 1/4 of an inch and is surrounded by a contusion ring.

Wound No. 4 on the left chest is 20 1/2 inches from the top of the head, 1 1/2 inches to the left of the midline. The wound measures 3/4 x 3/8 of an inch, is transverse and surrounding this is a 1/4 x 3/4 inch abrasion.

There is tanning of the arms. On the left arm there is a tattoo being "Tippit". On the dorsum of the left hand there is a crusted abraded area measuring 1 1/2 x 1/2 inch and a fresh abraded area on the dorsum of the right hand which measures 1 x 1/2 inch. The nails are quite well cared for although slightly dirty. Scar above the left knee, runs in an oblique fashion, crosses to the medial aspect of the knee, terminates on the leg measuring 7 inches. Poorly defined 1/2 inch inoculation type of scar on the left deltoid region.

16 1/2 inches from the top of the head, 3/4 of an inch to the right of the midline of the back in the subcutaneous tissue a missile is recovered from this region. This is associated with the Wound No. 3.

INCISIONS: The standard "Y" thoracabdominal and intercostal incisions are utilized. Examination of the wound of the right temple is made. It is found to enter in the right middle cranial fossa, pursues a course which is slightly upward, backward and

to the left. There is fracturing about the entrance and extensive fractures as it strikes the left occipitoparietal bone. It is recovered in this region, 3 inches to the left of the midline and approximately 1 inch from the top of the head. Examination of the brain is made. The brain weighs 1350 gm. The course of the missile through the brain is followed. It is found to enter the right temporal lobe, courses through the brain transecting the brain stem, severing the cerebral peduncles surrounded by extensive hemorrhage, and found to exit from the brain substance in the calcareous gyrus to the left of the midline. There are penetrations of the meninges in the regions described. Examination of the brain is otherwise not remarkable.

The abdominal peritoneum measures up to $\frac{7}{8}$ of an inch. The organs are in the normal position. Examination of the serous cavities is made. There is found to be extensive peritoneal hemorrhage, approximately 300 cc. In the right pleural space there is in excess of 1000 cc. of blood.

THE COURSES OF THE MISSILES ARE FOLLOWED. The wound described as No. 2 is found to go between the second and third rib. The missile is found to penetrate the anterior edge of the right upper lobe. The bullet is found to go into the pericardial sac, there is extensive hemorrhage in the pericardial sac, approximately 4 ounces. Passes through the superior vena cava. It exits into the mediastinum, strikes the fourth thoracic vertebra to the left of the midline, courses in the substance of the vertebra and is recovered slightly to the left of the vertebra approximately 16 inches from the top of the head, having pursued a course very slightly upward, to the left, and backwards.

Wound No. 3 is found to penetrate the chest wall as externally described, is surrounded by hemorrhage, notching the dorsum of the sixth rib slightly lateral to the costochondral junction. It penetrates the anterior edge of the right lower lobe of the lung, the diaphragm, penetrates the liver, the entrance wound to the liver and laceration which is approximately 3×2.5 cm. It pursues a course backward, upward, and to the left and is recovered from the soft tissue of the back, $16\frac{1}{2}$ inches from the top of the head and $3/4$ of an inch to the right of the midline. In its course it is also found to again penetrate the diaphragm after going through the liver and penetrates the posterior aspect of the right lower lobe.

Wound No. 4 is examined. It is found to be superficial and no penetration of the rib cage is noted. There is hemorrhage beneath the abraded and bruised area adjacent to the wound. No missiles are present in this area.

LUNGS: The lungs together weigh 1200 gm. The penetrations of the lung have previously been described. There are areas ofatelectasis and along the courses of the bullet through the lung there is extensive hemorrhage.

LIVER: The liver weighs 1670 gm. The penetrations of the liver have previously been described. The cut surface of the liver is not remarkable.

GALLBLADDER & HILARY TUBE: Not remarkable.

PORRACAVAL SYSTEM: Not remarkable.

KIDNEYS: The kidneys together weigh 350 gm. The capsule strips quite easily and they are pale.

ADRENALS: Not remarkable.

SPLEEN: The spleen weighs 100 gm. The capsule is smooth. The cut surface is not remarkable.

HEART: The heart weighs 320 gm. There is an epicardial ecchymosis, anterior surface, left ventricle. This is at the apex. The coronary arteries are opened in situ. They are found to be of good caliber, free of occlusions. The valves are not remarkable. The myocardium grossly is not remarkable.

PANCREAS: Not remarkable.

INTESTINAL TRACT: The stomach contains partially digested food, approximately 5 ounces. The duodenum is not remarkable. The small and large bowel are not remarkable. The appendix is present.

MUSCULO-SKELETAL SYSTEM: The musculo-skeletal system is not remarkable except for the previously described bullet injuries.

LUMPHATICS: Not remarkable.

MICROSCOPIC:

Brain: There is disruption of brain tissue with fresh hemorrhagic extravasations.

Liver: There is disruption with fresh hemorrhages. No inflammation or organization. Otherwise not remarkable.

Kidney: Non-contributory.

Pancreas: Non-contributory.

Lung: There is disruption of the parenchyma with fresh hemorrhages.

Adrenal: Non-contributory.

Skin: Sections of skin show disruption with hemorrhages. There is no inflammation or organization.

Heart: Non-contributory.

FINDINGS:

Gunshot wound to the head.
Brain parenchymal damage and hemorrhage.
Gunshot wounds of the chest.
Penetrations of the right lung, superior vena cava, and liver.
Right hemithorax.
Peritoneal hemorrhage.
Pericardial hemorrhage with cardiac tamponade.

CAUSE OF DEATH:

Gunshot wounds of the head and chest.

Earl F. Boce, M. D.

DALLAS COUNTY HOSPITAL DISTRICT
(Parkland Memorial Hospital)

Date 11/26/63

TOXICOLOGICAL REPORT

Case of J. C. Tippit Autopsy No. M161-352

Autopsy by Dr. Ford On 11/22/63

Examined for Sleeping and barbiturate.

Organs submitted Blood.

RESULT OF ANALYSIS:

Poisonous Gases -

Volatile Poisons Negative.

Acid-Ether soluble poisons Negative.

Alkaline-Ether soluble poisons -

Ammonia-Ether or ammonia-Chloroform soluble poisons -

Metallic Poisons -

Mineral acids and alkalies -

Halogens and their salts -

Salts of Oxy-acids -

Poisons isolated by special methods -

REMARKS: Blood type = "A"


Toxicologist, Dallas County Hospital
District

DALLAS COUNTY CRIMINAL INVESTIGATION LABORATORY
(Parkland Memorial Hospital
Dallas, Texas
BLOOD ALCOHOL ANALYSIS

Case of M-63-352 Referred by Medical Staff

Blood drawn by _____ At Parkland Hospital

Date Time AM. PM. Antiseptic used _____

Officers, identification, etc.: _____

Specimen received from:

Dallas J.J. Lock Box at 1115 AM Date 11/25/63 By Minion Patterson
 D.C. Lab. Lock Box at AM Date By
 Other (Describe): Mormon ice box.

Specimen transferred to H. R. Bay (Analyst).

Time 1:30 PM Date 11/25/63 By Minion Patterson

Specimen container: One test tube stoppered with rubber stopper.

Information from:

Analytical

Specimen: Date and time of analysis 11/25/63 1:40 PM

Whole Blood

Plasma or serum Analyst: H. R. Bay

Date (Micro-Greenberg Method):

<u>W₁</u> = <u>2.82</u>	<u>U₁</u> = <u>2.78</u>
<u>W₂</u> = <u>2.82</u>	<u>U₂</u> = <u>2.78</u>
<u>B₁</u> = <u>2.82</u>	<u>U₁ av. =</u> <u>2.78</u>
<u>B₂</u> = <u>2.86</u>	<u>U₂ =</u> <u>0.19</u>
<u>B_{av.}</u> = <u>2.86</u>	

Calculation:

Negative for alcohol.

Gas chromatogram Yes
 No

Result: Alcohol content Negative. %


M. J. Mease
Dallas City-County Criminal
Investigation Laboratory

GUNSHOT WOUND CHART

Name J. M. ZippitCounty Mt. - 352-63

		WOUND NO.											
		1	2	3	4	5	6	Ent.	Ex.	Ent.	Ex.	Ent.	Ex.
1. Location of wound:		Head	/										
		Neck											
		Chest		/	/		/						
Arm <	Abdomen												
	Back												
	Right												
	Left												
Leg <	Right												
	Left												
2. Size of wound:		Diam.											
		Width	1/4"	1/4	1/4		3/8						
		Length	7/8	3/8	5/16		3/4						
3. Inches from wound to:	Top of head	4 3/4	17	21	20 1/2								
	Right of midline	3 3/4	4	6									
	Left of midline						1 1/2						
4. Powder burns:		On skin											
		Clothing	<u>In Waller's clothing laboratory</u>										
		Absent	/										
5. Direction of bullet through body:	Backward	/	/	/									
	Forward												
	Downward												
	Upward	/	Slightly	/									
	To right												
6. Bullet found:		Calibre	Recovered	Recovered	Recovered								
		Shotgun											

Photographs made: Yes No X-rays made: Yes No

REMARKS: Measurements in inches

494

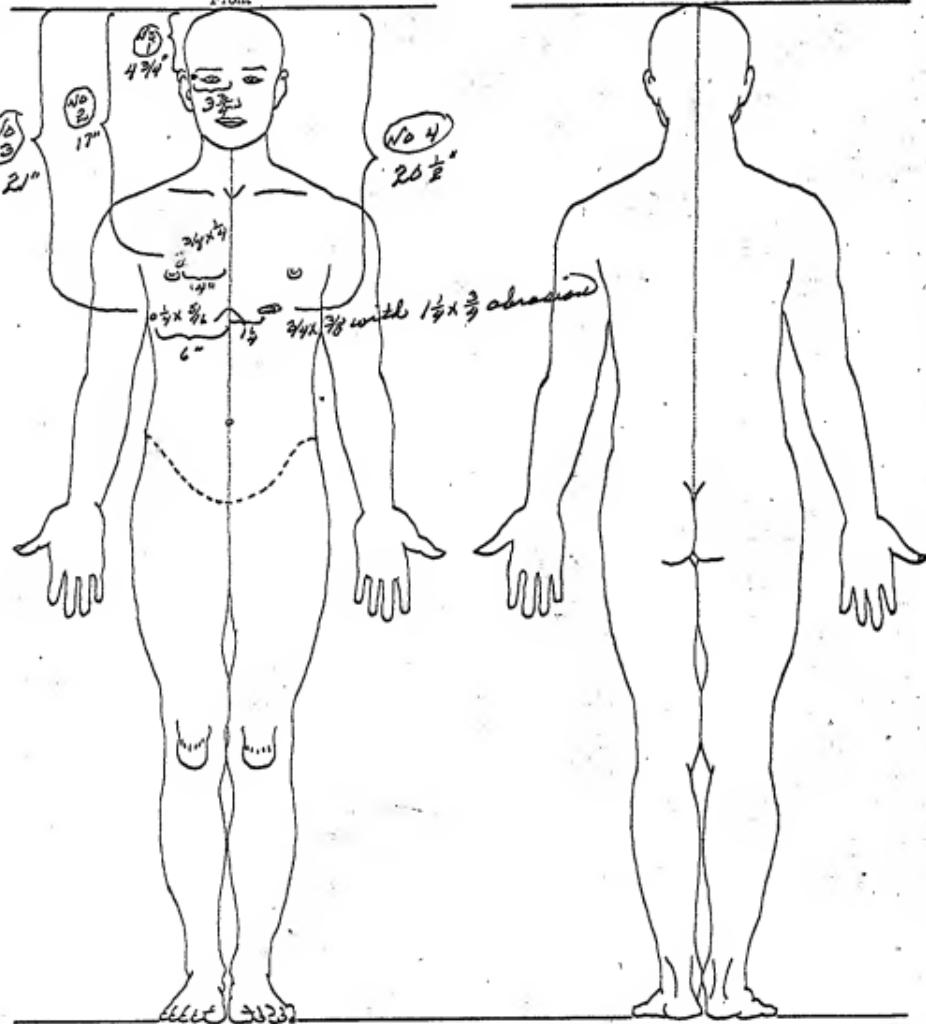
Examined by:

Carl F. H. Poole, M.D.Date: Nov. 22, 1963

BODY DIAGRAM

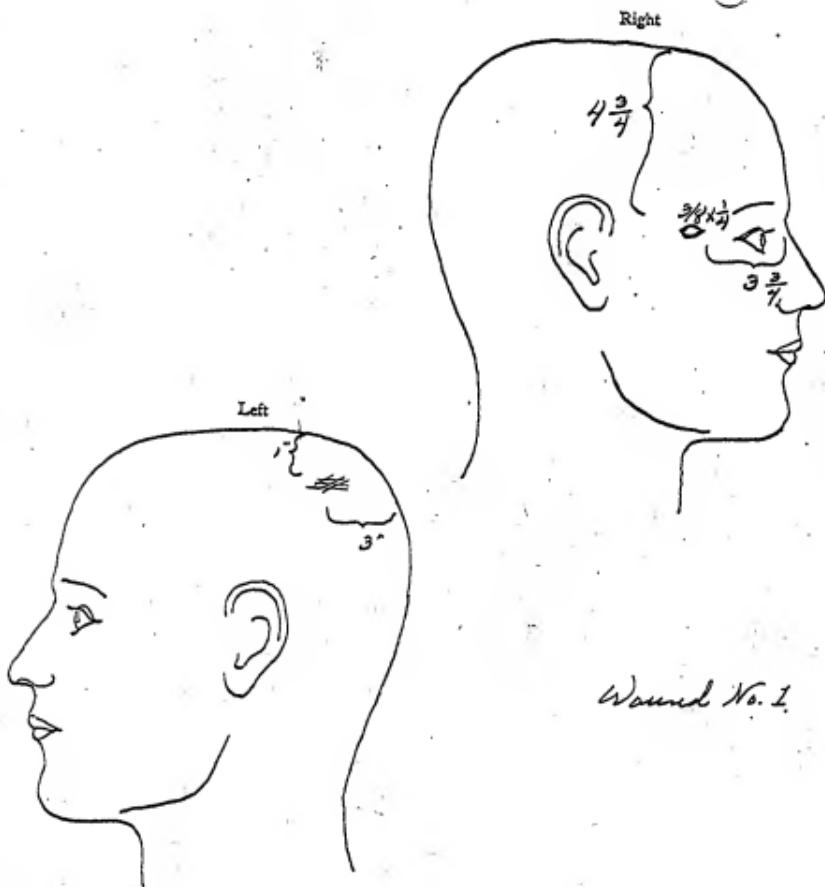
Front

Back



Decedent's
Height 5 ft 11 inches

Name J. D. Tippit #4 352-63
Examined By E. F. Morrissey Date 11-22-63



Wound No. 1.

Decedent's Name J. M. Tippit #352-63
 Examined E. F. Dray, M.D.
 By Date Mar 22, '63